

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

*(Only for new nonprovisional applications under 37 CFR 1.53(b))*

*Attorney Docket No.* 114205.3500

*First Named Inventor or Application Identifier*

A. BEHERA

*Express Mail Label No.*

## **APPLICATION ELEMENTS**

*See MPEP chapter 600 concerning utility patent application contents.*

Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission ( <i>if applicable, all necessary</i> )	
3. <input checked="" type="checkbox"/> Specification      Total Pages <b>18</b>	a. <input type="checkbox"/> Computer Readable Form (CRF)	
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113)      Total Sheets <b>9</b>	b. Specification Sequence Listing on:	
5. <input type="checkbox"/> Oath or Declaration      Total Pages <b>  </b>	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	ii. <input type="checkbox"/> paper	
a. <input type="checkbox"/> Newly executed (original or copy)	c. <input type="checkbox"/> Statements verifying identity of above copies	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i>	<b>ACCOMPANYING APPLICATION PARTS</b>	
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	<input type="checkbox"/> Power of Attorney
	11. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> )	
	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations

**ADDRESS TO:**

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*)

8.  Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)

a.  Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i.  CD-ROM or CD-R (2 copies); or

ii.  paper

c.  Statements verifying identity of above copies

#### **ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & document(s))

10.  37 CFR 3.73(b) Statement  
*(when there is an assignee)*  Power of Attorney

11.  English Translation Document *(if applicable)*

12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations

13.  Preliminary Amendment

14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*

15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*

16.  Other: \_\_\_\_\_

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	27160 (Insert Customer No. or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below			
NAME	KATTEN MUCHIN ZAVIS				
Address	525 West Monroe Street				
	Suite 1600				
City	Chicago	State	Illinois	Zip Code	60661-3693
Country	United States	Telephone		Fax	(312) 902-1061

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	20	-20 =	0	X \$ 18.00 = 0
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	6	-3 =	3	X \$ 84.00 = 126
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))	0		\$280.00 =	0
				BASIC FEE (37 CFR 1.16(a))	\$370.00
				Total of above Calculations =	
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
				TOTAL =	496.00

19. Small entity status

a.  small entity status is hereby claimed      b.  A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.

c.  Is no longer claimed.

20.  A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

21.  A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to charge the above fees or credit overpayments or charge any deficiencies to Deposit Account No. 50-1710:

a.  Fees required under 37 CFR 1.16.

b.  Fees required under 37 CFR 1.17.

c.  Fees required under 37 CFR 1.18.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Corinne M. Pouliquen, Registration No. 35,753
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SIGNATURE	
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DATE	2/12/02
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